## **U.S. Fiduciary Income Tax Return**

or the calendar year	1977 or fiscal year
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for the calendar year 1977 or fiscal year	
beginning, 1977, and ending,	19

1	9	7	7

Chec	applicable box(es): Estate (\$600 exemption)	cable box(es): Name of estate or trust ("Grantor type" trusts, see instruction O.) Employer identification					
	Testamentary trust	Name and title of fiduciary	itable and split-interest				
	Inter vivos trust Simple trust (\$300)				trusts Instructi		applicable boxes (See
	Complex trust (\$100)	Address of fiduciary (number and street)				cribed in	section 4947(a)(1)
_	Complex trust (\$300)						ated as a private foun-
	- 11 1 1 1 1 1 1 1 1	City, State, and ZIP code					by reason of sec. 509(a)
	Pooled income fund					(1), (2)	
First	return? 🔲 Yes 🔲 No. If	"No," has the fiduciary's address changed? 🔲 Yes 🔲 No. Final retu	n? Y	es 🔲 No	Des	cribed i	n section 4947(a)(2)
	1 Dividends (Enter	r full amount before exclusion)					
	2 Interest						
INCOME	3 Income from par	3 Income from partnerships and other fiduciaries					
	4 Gross rents and royalties 4						
ᅙ		s) from trade or business	5				
ĕ∣	6 Capital gain or (	6					
		s) from line 9, Form 4797 (Attach Form 4797)	7_				
		tate nature of income)	8			9	
_		ome (lines 1 to 8, inclusive)	10			9	
İ		10 Interest10					
	11 Taxes	Colonial (Calcadula A) and depletion Explain depletion	11 12				
		of depreciation (Schedule A) and depletion. Explain depletion	13				
		ction (Schedule B, line 9)	14				
	14 Fiduciary fees	ntant, and return preparer fees	15				
SS		s (Itemize on a separate sheet and attach)	16				
9		nes 10 to 16, inclusive)				17	
DEDUCTIONS		(Complex trusts and estates enter this amount in Schedule C, line 1 also	0)			18	
2		stributions to beneficiaries	19				
DE	20 Adjustment of d		20				
		ole to income in respect of a decedent (Fiduciary's share)	21				
	22 Long-term capital g	22					
		al return, see General Instruction M.)	23				
		es 19 to 23, inclusive)				24	
	25 Taxable income	of fiduciary (line 18 minus line 24)				25	
	26 Tax on amount of	n line 25 <b>(See tax rate schedule)</b>				_26	
	27 If alternative tax	is applicable, enter the tax from Schedule D (Form 1041) I	ine 29			27	
		e of foreign tax credit (Attach Form 1116)	28				
	29 Fiduciary's share of investment credit (Attach Form 3468) 29						
×		(b) New jobs credit (c) Total	30_				
TAX		nes 28 to 30, inclusive)				31	
느	32 Balance (line 26 or 27, whichever is applicable, less line 31)					32_	
0		ng fiduciary's share of prior year investment credit (Attach Form 425	o5)			33_	
COMPUTATION	34 Minimum tax (Attach Form 4626)					34_	
AT	Total (lines 32 to 34, inclusive)					35	
5		f credit for tax paid at source on tax-free convenant bond interest ax on special fuels, nonhighway gas and lub. oil (Attach Form 4136)	36				
4P		The state of the s	38				
Ő	20						
0	40 M						
	40 Federal income tax withheld (Attach Form w-2)  41 Total (lines 36 to 40, inclusive)					41	
	42 Balance of tax due (line 35 less line 41) (See Instruction H.)					42	
	43 Overpayment (line 41 less line 35)					43	
Unde	r populties of pariury I dec	lare that I have examined this return, including accompanying schedules and st	atements,	and to the b	est of my i	nowledge	and belief it is true, correct
		parer (other than fiduciary) is based on all information of which preparer has	any Knol	mieuge.			
Sig	n	Signature of fiduciary or officer representing fiduc	iary				Date
he	re •	Signature of paid preparer (other than fiduciary) and ide	ntifving	number (S	ee Instru	ction G)	
		Paid preparer's address (or employer's name, add					

Scl	nedule A.—DEPRECIATION	—(See the Instruct	tions for Schedule	A for information on t	he depreciation me	thods.)	
	a. Description of property	<b>b.</b> Date acquired	c. Cost or other basis	d. Depreciation allowed or allow- able in prior years	e. Method of computing depreciation	f. Life or rate	g. Depreciation for this year
1	Total additional first-year deprec	iation—estates o	nly (do not inclu	de in items below)-	· · · · · · · · · · · · · · · · · · ·	<del>,&gt;</del>	
2	Other depreciation:					-	
			<u> </u>			.!	
_	Totals						
	Less amount of depreciation cla						
5	Balance (line 3 minus line 4) . Fiduciary's portion of line 5. Ent	or here and on pag					
5	nedule B.—CHARITABLE D	FDUCTION—(	ge 1, ille 12 . Uttach statement ø	iving name and addres	s of charitable orga	nization.)	· ·
	Amounts paid or permanently s						
	Tax-exempt interest allocable to			Tom Current year 5			
2	(Complete lines 3 and 4 below only			15. column 2. exceeds			
	loss on Schedule D (Form 1041) line 14			, 20, 00.2 2, 0000			
3	a Long-term capital gain includ				_		
•	(Do not complete lines b and c if such		1				
	b Enter gain on Schedule D (I		1				
	minus loss on Schedule D (Fe		4			ŀ	
	c Enter gain on Schedule D (F		l l			1	
	minus loss on Schedule D (Fo	orm 1041) line 14	, column 3 .		_		4
	Enter 50% of the smallest of lin						
	Enter sum of line 2 and line 4					• •	
	Balance (line 1 minus line 5) .						
7	Enter short-term capital gains a					ocable	
_	to corpus, paid or permanently					•	
	Amounts paid or permanently set asid Total (line 6 plus lines 7 and 8)						
Sc	hedule C.—DISTRIBUTABL	E NET INCOME	AND DISTRI	BUTIONS DEDUC	TION		
	Enter amount from page 1, line					1	
	Add: a Tax-exempt interest (a					2a	
_	b Net gain shown on Sch					b	
	c Schedule B, lines 4 and					<u> </u>	
	d Short-term capital gain					<u>d</u>	
	e If amount on page 1, li					<u>e</u>	
3	Total (line 1 through line 2e)					3	
4	If amount on page 1, line 6, is a	gain, enter amou	nt here			4	
5	Distributable net income (line 3	3 minus line 4)				5	
6	Amount of income required to	be distributed cu	irrently			6	
	Other amounts paid, credited, o					7   -	
8	Total (lines 6 and 7)					9	
	Enter the total of tax-exempt inc					10	
10	Balance (line 8 minus line 9) . Enter distributable net income	(line 5 above)				11	
17	Enter the amount from line 2a	ahove				12	_
12	Balance (line 11 minus line 1	2)				13	
14	Distributions deduction. Enter here ar	d on page 1, line 19,	, the lesser of line	10 or line 13 above .	<u> </u>	14	
	Date trust was created or, if an estate			6 Does the estate or	trust receive all or	any part of t	-   103   110
-				(salary, wages, and e son of a contract ass		-	_
2	Did you receive tax-exempt income? .			7 Have you deducted of	-	_	1////\\
	If "Yes," did you deduct any expenses			directly for the bene	fit of the grantor or	spouse?	
3	If the estate or trust received income for	rom a nominee, state	name,	8 Did the estate or tru			
	identifying number, and address of no		7////////	any interest in or sig ties, or other financ	ial account in a for	eign country	(except in a
				U.S. military banking	g facility operated b	y a U.S. finar	ncial institu-
				tion)? If "Yes," see			/////
4	If a complex trust, is this a section 663 If "Yes," state amount ▶	(b) election?	• •	9 Was the estate or tr trust during any tax	cable year, which fo	reign trust w	as in being  ////
				during the current to	axable year, whether	or not the es	tate or trust
5	If a trust, is any section 644 tax due?	and attach comput	tation.	has any beneficial i required to file Forr			